



TOWN OF DAVIE USE ONLY

Petition Number: _____

Initial Fee: _____

Receipt Number: _____

Submittal Date: _____

Received By: _____

**Land Use Plan Amendment
Application
Planning and Zoning Division
Development Services Department**

Information must be typed and notarized
Make checks payable to Town of Davie

_____ TOWN OF DAVIE LAND USE PLAN AMENDMENT

_____ BROWARD COUNTY & TOWN OF DAVIE LAND USE PLAN AMENDMENT

PUBLIC HEARINGS

(To be filled in by the Town)

LOCAL PLANNING AGENCY _____ PUBLICATION DATE _____

RECOMMENDATION

TOWN COUNCIL _____ ACTION _____ PUBLICATION _____

TOWN COUNCIL _____ ACTION _____ PUBLICATION _____

BROWARD COUNTY PLANNING COUNCIL _____ ACTION _____

BROWARD COUNTY PLANNING COUNCIL _____ ACTION _____

BROWARD COUNTY COMMISSION _____ ACTION _____

BROWARD COUNTY COMMISSION _____ ACTION _____

Notices Sent: _____ Replies: _____

APPLICATION

I. LAND USE PLAN DESIGNATIONS:

	<u>Existing</u>	<u>Requested</u>
Town of Davie Plan	_____	_____
Broward County Plan	_____	_____

II. APPLICANT:

Name _____

Address _____

Telephone _____

Relationship to Property _____

PROPERTY OWNER(S):

Name _____

Address _____

Telephone _____

Does the applicant and/or representative own any of the property that is the subject of this application? YES _____ NO _____

If yes, describe interest:

- a) Gross Acreage _____ Net Acreage _____
- b) Delineate on survey and attach to application

BROWARD COUNTY TAX FOLIO NUMBER(S): _____

III. LEGAL DESCRIPTION: (Sealed survey indicating gross and net acreage must be submitted with application)

North side of _____

South side of _____

East side of _____

West side of _____

(Use additional sheets as necessary)

[illegible]

1. EXISTING AND PROPOSED USES

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- E. Proposed use of the amendment site including square footage and/or dwelling unit count proposed for each parcel.

2. ANALYSIS OF PUBLIC FACILITIES AND SERVICES

The items below must be addressed to determine the impact of an amendment on existing and planned public facilities and services. Provide calculations for each public facility and/or service.

A. Sanitary Sewer Analysis

1. Identify whether the site is currently and/or proposed to be serviced by septic tanks.
2. Identify the sanitary sewer facilities serving the service area in which the amendment is located including the current plant capacity, current and committed demand on plant capacity, and committed plant capacity.
3. Identify the change in demand on plant capacity resulting from this amendment. Provide calculations, including anticipated demand per square foot* or dwelling units.
4. Identify the projected plant capacity and demand for the short and long range planning horizons as identified within the adopted comprehensive plan. Provide demand projections and information regarding planned capacity expansions including year, identified funding sources and other relevant information.
5. Provide information regarding existing and proposed trunk lines and lateral hookups to the amendment site.
6. Letter from utility verifying the information on items 1-5 above.

B. Potable Water Analysis

1. Provide the adopted level of service standard for the service area in which the amendment is located.
2. Identify the facilities serving the service area in which the amendment is located including the current plant capacity, current and committed demand on the plant and the South Florida Water Management District (SFWMD) permitted withdrawal.
3. Identify the wellfield serving the service area in which the amendment is located including the permitted capacity, committed capacity, remaining capacity and expiration date of the permit.
4. Identify the change in potable water demand resulting from this amendment - provide calculations including anticipated demand per square foot or dwelling units.

5. Identify the projected capacity and demand for the short and long range planning horizons as included within the adopted comprehensive plan - provide demand projections and information regarding planned plant capacity expansions including year, funding sources and other relevant information. If additional wellfields are planned, provide status including the status of any permit applications.
6. Provide information regarding existing and proposed trunk lines and water main hookups to the amendment site.
7. Letter from utility verifying the information in items 1-6 above.

C. Drainage Analysis

1. Provide the adopted level of service standard for the service area in which the amendment is located.
2. Identify the drainage systems serving the service area in which the amendment is located.
3. Identify any planned drainage improvements, including year, funding sources and other relevant information.
4. Indicate if a Surface Water Management Plan has been approved by, or an application submitted to, the SFWMD and/or any independent drainage district, for the amendment site. Identify the permit number(s), or application number(s) if the project is pending, for the amendment site. If an amendment site is not required to obtain a SFWMD permit, provide documentation of same.
5. If the area in which the amendment is located does not meet the adopted level of service and there are no improvements planned (by the unit of local government or drainage authority) to address the deficiencies, provide an engineering analysis which demonstrated how the site will be drained and the impact on the surrounding properties. The information should include the wet season water level for the amendment site, design storm elevation, natural and proposed land elevation, one hundred year flood elevation, acreage for proposed water management retention area, elevations for buildings, roads and years, storage and runoff calculations for the design storm and estimated time for flood waters to recede to the natural land elevation.
6. Letter from the local drainage district serving the area in which the amendment is located verifying the information in items 1-5 above.

D. Solid Waste

1. Provide the adopted level of service standard for the service area in which the amendment is located.
2. Identify the facilities serving the service area in which the amendment is located including the landfill/plant capacity, current demand on landfill/plant capacity and committed landfill/plant capacity.
3. Identify the change in demand resulting from this amendment. Provide calculations including assumed demand per square foot or dwelling unit.
4. Letter from service provider verifying the information in items 1-3 above.

E. Recreation and Open Space Analysis

1. Provide the adopted level of service standard for the service area in which the amendment is located and the current level of service.
2. Identify the parks serving the service area in which the amendment is located including acreage and facility type, e.g. neighborhood, community or regional park.
3. Quantify the change in need for park acreage resulting from this amendment.
4. Identify the projected park needs for the short and long range planning horizons as identified within the adopted comprehensive plan - provide need projections and information regarding planned capacity expansions including year, identified funding sources, and other relevant information.

F. Traffic Circulation Analysis

1. Identify the roadways impacted by the proposed amendment and indicate the number of lanes, current traffic volumes, adopted level of service and current level of service for each roadway.
2. Identify the projected level of service for the roadways impacted by the proposed amendment for the 2015 planning horizons. Please utilize average daily traffic volumes per the Transportation Element of the Town of Davie Comprehensive Plan.
3. Staff will analyze traffic impacts resulting from the amendment. You may provide a traffic impact analysis for this amendment - calculate anticipated average daily traffic generation for the existing and proposed land use designations. If the amendment reflects a net increase in traffic generation, identify access points to/from the amendment site and provide a distribution of the additional traffic on the impacted roadway network and identify the resulting level of service change for the 2015 planning horizons.
4. Provide any transportation studies relating to this amendment, as desired.

G. Mass Transit Analysis

1. Identify the mass transit modes serving the amendment area.
2. Identify the change in demand resulting from this amendment.
3. Identify the existing and planned mass transit routes and scheduled service (headway) for the amendment area.
4. Letter from service provider verifying the information in items 1-3 above.
5. Describe how the proposed amendment furthers or is consistent with the concept of a "transit-oriented development".

3. ANALYSIS OF NATURAL AND HISTORIC RESOURCES

Indicate if the site contains, is located adjacent to or has the potential to impact any of the natural and historic resource(s) listed below, and if so, how they will protect or mitigated. Staff may request additional information from the Department of Planning and Environmental Protection and the Broward County Historical Commission regarding the amendment's impact on natural and historic resources. The applicant is encouraged to contact the individual review agencies to discuss these issues.

A. Historic sites or districts on the National Register of Historic Places or locally designated historic sites.

B. Archaeological sites listed on the Florida Master Site File.

C. Wetlands.

D. Local Areas of Particular Concern as identified within the Broward County Land Use Plan.

E. "Endangered" or "threatened species" or "species of special concern" or "commercially exploited" as per the Florida Fish and Wildlife Conservation Commission (fauna), the U.S. Fish and Wildlife Service (flora and fauna), or the Florida Department of Agricultural and Consumer Services (fauna). If yes, identify the species and show the habitat location on a map.

F. Plants listed in the Regulated Plant Index for protection by the Florida Department of Agriculture and Consumer Services.

G. Wellfields - indicate whether the amendment is located within a wellfield protection zone of influence as defined by Broward County Code, Chapter 27, Article 13 "Wellfield Protection." If so, specify the affected zone and any provisions which will be made to protect the wellfield.

H. Soils - describe whether the amendment will require the alteration of soil conditions or topography. If so, describe what management practices will be used to protect or mitigate the area's natural features.

4. LAND USE COMPATIBILITY

Describe how the amendment is consistent with existing and planned future land uses in the area (including adjacent communities). Identify specific land development code provisions or other measures that have or will be utilized to ensure land use compatibility.

5. CONSISTENCY WITH GOALS, OBJECTIVES AND POLICIES OF THE TOWN OF DAVIE COMPREHENSIVE PLAN

List of objectives and policies of the Town of Davie Comprehensive Plan which the proposed amendment furthers.

6. POPULATION PROJECTIONS FOR THE TOWN OF DAVIE

A. Population projections for the year 2010 planning horizon.

B. Population projections resulting from proposed land use (if applicable).

C. Using population projections for the year 2010 planning horizon, demonstrate the effect of the proposed amendment on the land needed to accommodate the projected population.

7. FIRE PROTECTION

Address the availability of essential services for the 2015 planning horizon.

8. POLICE PROTECTION

Address the availability of essential services for the 2015 planning horizon.

9. SCHOOL SITE AND PUPIL GENERATION

Address the availability of essential services for the 2015 planning horizon.

10. ADDITIONAL SUPPORT DOCUMENTS

Other support documents or summary of support documents on which the proposed amendment is based.

11. PLAN AMENDMENT COPIES

- A. Five (5) copies for the Town of Davie.
- B. Additional copies will be requested for the Local Planning Agency and Town Council meetings.

PETITION #: _____

OWNER'S NAME(S) (PRINT)

APPLICANT'S NAME (PRINT)

OWNER'S SIGNATURE (ALL OWNERS
MUST SIGN)

APPLICANT'S SIGNATURE

ADDRESS

ADDRESS

CITY, STATE, ZIP CODE

CITY, STATE, ZIP CODE

TELEPHONE

TELEPHONE

The foregoing instrument was acknowledged

The foregoing instrument was acknowledged

before me this _____ day of _____,

before me this _____ day of _____,

20____, by _____

20____, by _____

who is personally known to me or has produced

who is personally known to me or has produced

as identification and who did take an oath.

as identification and who did take an oath.

NOTARY PUBLIC:

NOTARY PUBLIC:

SIGN: _____

SIGN: _____

PRINT: _____

PRINT: _____

My Commission Expires:

My Commission Expires:

Timeline

Land Use Plan Amendment Process

